

AFFIDAVIT OF EDUCATIONAL REQUIREMENTS

I, the undersigned, on oath depose and say that _____
(Name of student or trainee)

of _____ attended the courses of _____
(Address) (School or Company Name)

_____ from _____ 20____ to _____ 20____
(School or Company Name)

and has successfully completed courses approved by the New Hampshire Insurance Department in the following lines:

(Life, Accident & Health, Property & Casualty)

Signed _____

(Official title as school or company official)

State _____

County _____

Subscribed and sworn to before me this _____ day of _____ 20____

(Notary Public)

My commission expires _____

AFFIDAVIT OF EXPERIENCE AND EMPLOYMENT

(To be completed by someone other than applicant)

I, the undersigned, on oath depose and say that I am a licensed (agent) (broker) or representative of _____
(Name of Company)

_____, that for the period of time beginning _____ 20____ and ending _____ 20____
(Name of Company)

_____ of _____
(Name of Employee) (Address)

was employed on a substantially full time basis by (me) (my firm) at _____, that he was trained in the
following lines of insurance _____ and satisfactorily performed the following duties:

Signed _____

Firm or Agency Name _____

State _____

County _____

Subscribed and sworn to before me this _____ day of _____ 20____

(Notary Public)

My commission expires _____